Combined Declaration For Patent Application and Power of Attorney							ATTORNEY DOCKET 85512DMW					
As below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:												
SYSTEM AND METHOD FOR ESTIMATING SYNTHESIZING AND MATCHING NOISE IN DIGITAL IMAGES AND IMAGE SEQUENCES												
The specification of which (check only one item below):												
X is attached hereto.												
was filed as United States Application Serial No. on and was amended on (if applicable).												
was filed as PCT international application Number on and was amended on (if applicable).												
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-*d) or 365 (b) of any foreign application(s) for patent or inventor's certificate, or (365 (a) of any PCT international application(s) which designates at least one country other than the United States of America, listed below and have also identified below any foreign applications(s) for patent or inventor's certificate or any PCT international application(s) designating a least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which												
priority is claimed:												
PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119: COUNTRY APPLICATION NUMBER DATE OF FILING PRIORITY CLAIMED UNDER 35 USC §119												
(# PCT, indicate PCT)				(month/day/year)			YES		NO			
							YES		NO			
							YES		NO			
I hereby claim the benefit under Title 35, United States Code, 119 §(e) of any United States provisional application(s) listed below:												
PRIOR PROVISIONAL APPLI	CATION(S) AND	ANY PRIORIT	Y CLA	MS UNDER 35 U.S.C.	§119 (e):							
PROVISIONAL AP	PLICATION NUMBER				FILING DATE (m	onth/day/year)						
I hereby claim the benefit under Title 35, United States Code, §120 of any prior United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior applications(s) in the manner provided by the first paragraph of Title 35, §112, I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application: PRIOR US APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S FOR BENEFIT UNDER												
35USC§120: U.S. APPLICATIONS				STATUS (Check one)								
U.S. APPLICATION NUM	U.S. FILING DATE		ING DATE	PATENT	ED	PENDING	ABA	NDONED				
PCT APPLICATIONS DESIGNATING THE U.S.												
PCT APPLICATION NO. PCT FILI		IG DATE		J.S. SERIAL NUMBERS ASSIGNED (if any)								
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P	POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or											
agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute												
this application and transact all business in the Patent and Trademark Office connected												
therewith.												
S	S nd Correspondence to: Direct Telephone Calls to:											
Patent Legal Staff (name and telephone number)												
Eastman Kodak C 343 State Street				1 7	David M.	David M. Woods						
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Rochester, NY 1				14650-2201		FAX: (585) 477-4646						
2	FULL NAME OF INVENTOR	FAMILY NAME Fielding		FIRST GIVEN NAME Gabriel	SECOND GIVEN N	SECOND GIVEN NAME						
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٦ [BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Company		343 State Street, Rochester	4	STATE & ZIP CODE (COUNTRY) New York 14650 USA						
2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME		SECOND GIVEN NAME						
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